Form 990-BL

(Revised October 1981) Department of the Treasury Internal Revenue Service

Information and Initial Excise Tax Return for Black Lung Benefit Trusts and Certain Related Persons

(Under section 501(c)(21) of the Internal Revenue Code)

OMB No. 1545-0049

For calendar year 19 , or fiscal year beginning	, 19 ,	and ending , 1	.9
Name of trust		Employer identification number (see instruc	ction
Name of other person filing return (see instructions)		Social security number (see instructions)	
Address of filer (number and street)		If application pending, check here .	-
City on town Chate and 7ID and	, , , , , , , , , , , , , , , , , , ,	If address changed, check here >	<u> </u>
City or town, State and ZIP code		FMV of assets at beginning of operator's taxable year ▶	
Return filed by (see General Instruction A and Specific Instruction Trust (Open for public inspection—other than Part IV) Trustee (Not open for public inspection)		es): d person (Not open for public inspection)	
Part I Analysis of Revenue and Expenses (see instruct	tions)		
1 Contributions received			
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	art III	Questionnaire					Yes	No
22	Have any	r changes not previously reported to the Internal Revenue	Service been made in	vour governin	g instrument or of	hor	///////	<u>//////</u> //////////////////////////////
		nt of similar import?		· · · · ·	g matrument, or ot		9///////	90000
	If "Yes," attach a conformed copy of the changes.				·			
23	Self-dealing (section 4951):							
	(a) Have	you engaged in any of the following acts during the year	either directly or ind	irectly, with on	e or more disqualit	fied		
		ons (see instructions for definition)—			·			
	(1) \$	Sale, exchange, or leasing of property?				.		
	(2) E	Borrowing or lending of money or other extension of cred	it?			.		
	(3)	Furnishing of goods, services, or facilities?						
	(4) Payment of compensation (or payment or reimbursement of expenses)?				1			
		ransfer to, or use by or for the benefit of, a disqualified p				J		
	(b) If an	y of questions 23(a)(1) through 23(a)(5) is answered "\	'es,'' were all of the	acts in which y	ou engaged excep	ted		
		described in the instructions?				.		/////// //
		is "No," complete Schedule A (Form 990–BL), Part I, Sec	tion A.			l		
24		taxable expenditures (section 4952):				l		
	During the year did you pay, or incur a liability to pay any amount for any purpose other than for payment of: (1) black lung benefits, (2) administrative expenses of the trust, (3) premiums for insurance covering liabilities for black lung benefits, (4) permitted investments of trust funds, (5) transfer of funds to the Federal Black Lung Disability Fund or to the general fund of the U.S. Treasury, or (6) return of excess contributions to the coal mine operator who contributed them?					its, eral	Willia. Taran	UMA TATATA
25		complete Schedule A (Form 990–BL), Part I, Section B.				.		
23		ective action been taken with respect to any transaction wl	•	ter 42 taxes bei	ng reported on Sch	ed-	<i>''''</i>	111111111
	•	rm 990–BL)?					<i>\\\\\\</i>	
		alue of any property recovered as a result of the correction			·			
		planation (see instructions)).	φ	(101	any uncorrected at	is,		
26		directors, trustees and their compensation, if any, for the	tax year:					
		Name and Address	Title and time devoted to position	Contributions to employee benefit plans	Expense ac- count, other allowances	Comp	ensati	on
Tot	al	· · · · · · · · · · · · · · · · · · ·	<u> </u>		•			
E	art IV	Statement With Respect to Contributors, etc. (N	ot open for public	inspection)				
1 F	Persons wh	no contributed \$5,000 or more in the taxable year: (if more	space is needed, atta		***			
		Name		Add	ress			
		,						
	····							
2 [Ouring the	period covered by this return did the trust receive any cor	tributions in excess	of the maximur	n allowable deducti	on	Yes	No
		ntributor under section 192?	<u> </u>	<u></u>	<u> </u>			

SCHEDULE A (Form 990-BL)

(Revised October 1981) Department of the Treasury Internal Revenue Service

Computation of Initial Excise Taxes on Black Lung Benefit Trusts and Certain Related Persons

(Under sections 4951 and 4952 of the Internal Revenue Code)

OMB No. 1545-0049

NOT Open for Public Inspection

For calendar ye Name of trust/pe	ar 19 , or fiscal yearson filing return (see instru		, 19 , and	ending , 19 Employer identification number or social security number of filer (see instructions)			
Name of related section 501(c)(21) trust (if applicable)							
Return filed by ((see instructions, check b	ox that applies): Disqualified pe	erson				
Part I In	nitial Taxes on Self-de	aling (Section 49	51) and Taxable Expenditures (S	ection 4952)			
	SEC	TION A.—Acts of Se	elf-dealing and Tax Computation (Sect	tion 4951)			
a. Act number	b. Date of act	c. Description of act					
1							
2 · · · · 3							
4							
d. Nam	es of disqualified persons lia	ble for tax	e. Names of trustees liable for tax				
f. Amou	int involved in act	g. Initial	tax on self-dealing disqualified person (10% of column f)	h. Tax on trustee (if applicable) (2½% of column f)			
Total							
	SECTION	ON B.—Taxable Ex	penditures and Computation of Tax (Section 4952)			
a. Item number	b. Amount	c. Date paid or incurred	d. Name and address of recipient	e. Description of expenditure and purposes for which made			
1							
2							
4							
f. Names of trustees liable for tax		tax	g. Tax imposed on trust (10% of column b)	h. Tax imposed on trustee (if applicable) (2½% of column b)			
Total							
Part II Su	ummary of Taxes						
1 Enter section	4951 tax on disqualified	person (Part I, Sec	etion A, column g)				
2 Enter section	4951 tax on trustee (Pa	art I, Section A, col	umn h)				
3 Enter section	4952 tax on trust (Part	I, Section B, colum	ın g)				
4 Enter section	4952 tax on trustee (Pa	art I, Section B, col	umn h)				
5 Tax due (see	e instructions). Pay in	ull with return. (N	Make check or money order payable	e to			